

I. **Particulars of Director/Dean/Principal:** (Whosoever is Head of Training Centre)Name: **Dr.S.P. Dange** Age: **62** (Date of Birth) **04/06/1959**

| PG Degree | Subject | Year | Institution | University |
|------------------------------|----------------|------|--------------|------------|
| Recognized/ NotRecognized | Prosthodontics | 1988 | GDCH, Nagpur | Nagpur |

Teaching Experience

| Designation | Institution | From | To | TotalExp. |
|----------------------------|-------------------|------------|------------|-----------|
| Assistant Professor | GDC&H, Aurangabad | 10/04/1991 | 20/06/2000 | 09 years |
| Associate Professor/Reader | GDC&H, Aurangabad | 21/06/2000 | 22/08/2004 | 04 years |
| Professor | GDC&H, Aurangabad | 23/08/2004 | 12/08/2015 | 11 years |
| Dean | GDC&H, Aurangabad | 13/08/2015 | till date | 07 years |
| Grand Total | | | | 31 years |

2. **Management/Society/Inst.Information:**

| | | |
|----|--|---|
| 01 | i)Name of the Society/Institution/ College/University Department: | Govt. Dental College & Hospital, Aurangabad |
| | ii)Postal Address, with PIN: | Dhanvantari nagar, Ghati Campus, Aurangabad - 431001 |
| | iii)Contact Details: | Mob: 9422714209, Tel.:0240-2402381-83 |
| | iv)E-mail ID: | gdca83@yahoo.com Web-www.gdchaurangabad.org |
| 02 | Society/Institution/College Registration Number and date: | i)Public Trust Act1950:..... ii)Society's Registration Act.1860:..... iii)Year of establishment: 1983 iv)Copies of Registration,Constitution and Memorandum of Association attached? *Yes/No-Mark asAppendix'A' |
| 03 | Hospital Information: (It is mandatory for Training Centre/applying Institute to have their own functional Hospital as per norms) i) Name of theHospital ii) Nursing Home Registration No. iii) EstablishmentYear | Govt. Medical College & Hospital, Aurangabad.-Mark as Appendix'B' |
| 04 | i)Name of the College/Institute where course is to be conducted: | Govt. Dental College & Hospital, Aurangabad |
| | ii)Postal Address,with PIN: iii) Contact Details: iv)E-mail ID: | Dhanvantari nagar, Ghati Campus, Aurangabad - 431001 Mob: 9422714209, Tel.:0240-2402381-83 gdca83@yahoo.com Web-www.gdchaurangabad.org |
| | v)List of University approved Fellowship/Certificate Course(s) conducted/already running at Training Centre with Intake Capacity | Name of the Course (s) : 01) Oral Implantology 02) Micro-Dentistry Approved Intake Capacity : 01 & 10 Affiliated Since 2017-18 |
| | vi)Training Centre/Institute willing/desirous to Start/Open Fellowship/Certificate Course(s) (For New Opening Purpose only) | Name of the Course(s): Required Intake Capacity: (if necessary Attach separate List) |
| 05 | Fee details:(Bank/DD no./date/amount) | Yes (RTGS/NEFT UTR No.-) SBIN221295721114 Rs. 50000/- (Fifty Thousand Rupees only) |
| 06 | Financial position of the Society/ Institute in the preceding 03 years: | Audited Statements of Accounts for *Yes |
| 07 | Budgetary provision for the FC/CC/DCfor the next 03 years: | As per Govt. rules |

| | | |
|----|--|---|
| 08 | Management Resolution seeking Recognition of Institute for FC/CC/DC of MUHS,Nashik: | As per Govt. rules |
| 09 | Other Information a) Land i) Whether the land is owned by Applicant institute / College/ Trust : ii) Whether the land is registered? iii) Any loans, mortgage, etc. shown against the title of the land : B) Building i) Total built-up area : | Govt. Dental College & Hospital, Aurangabad College Yes No 76142.383 Sq.feet |

3. Central Library

Total number of Books in library:**8119**

Books pertaining to concerned Fellowship subject:**156**

Purchase of latest editions of concerned books in last 3 years:**42**

Journals:

| Journals | Total | Concerned Fellowship subject |
|----------|-------|------------------------------|
| Indian | 23 | 08 |
| Foreign | 33 | 12 |

Year/Month up to which latest Indian Journals available:

June 2020

Year/Month upto which latest Foreign Journals available:July 2020

Internet/ Med pub/Photocopy facility:

Available

Library opening times: 08: 00 AM

Reading facility out of routine library hours:

Available

(Obtain list of books & journals duly signed by Dean)

4. Recreational facilities : Available

| |
|------------------------|
| Play grounds Gymnasium |
|------------------------|

5. Hostel Accommodation:

| Particular | UG | | PG | | Interns | |
|-----------------------|------|-------|------|-------|---------|-------|
| | Boys | Girls | Boys | Girls | Boys | Girls |
| No.of Rooms | 22 | 45 | 10 | 15 | 08 | 18 |
| No.of Students | 40 | 152 | 20 | 48 | 10 | 28 |
| Status of Cleanliness | | | | | | |

6. Residential accommodation for Staff/Paramedical staff :Available

7. Ethical Committee (Constitution):YES

8. Medical Education Unit(Constitution):YES

(Specify number of meetings held annually & minutes thereof)

9. Any other faculty specific information required:(such as Herbal garden/PanchakarmaUnit

Pharmacy/Dental Chairs and Units as per the requirement✓)



(Handwritten signature)